PATENT APPLICATION FEE DETERMINATION RECOR Effective October 1, 2000								A	Application or Docket Number 0990498				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								MALL E	MIITY	OR	OTHER SMALL		
TOTAL CLAIMS			53	3			Г	RATE	FEE	1	RATE	FEE	
FOR			NUMBER	FILED	NUMBER EXTRA		B	ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			<i>5</i> 3 minus 20∞		. 33			X\$ 9=		OR	.X\$18=	594	
INDEPENDENT CLAIMS			5 mt	nus 3 =	2		F	X40=		OR	Xé0=	160	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT		0		r	+135=		OR	+270=	, , ,	
" If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL	11166		
CLAIMS AS AMENDED - PART II										,	OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	·53	Minus	•3	`3	•		X\$ 9=		OR	X\$18=		
	Independent	• 5	Minus	 5		- /		X40=		OR	X80=		
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT, CLAIM							+135=	·	OR	+270=		
	1.1- 2/2/06							TOTAL		20	YOYAL		
	(Cotumn 1) (Cotumn 2) (Cotumn 3)							DOIT. FEE			ADDIT. FEE		
	CLAIMS			HIGH					ADDI-	1		ADDI-	
AMENDMENT I		AFTER AMENDMENT		PREVI	DUSLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	· <u>5</u> 3	Minus	• _/	23			X\$ 9=		OR	X\$18=		
	Independent	NTATION OF MI	Minus	ENDEND	<u>5</u>	-		X40=		OR	X80=		
L	- INST PAESE	NIATION OF BIL	ACTIFICE DEF	ENDEN	COUNT	ا الحاديد		+135=		OR	+270=		
								YOTAL DIT. FEE		OR	YOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)								,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
AMENDMENT C		CLAIMS REMAINING		HIGH NUM		PRESENT			ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIO		EXTRA] RATE	RATE	TIONAL FEE		RATE	TIONAL FEE	
	Total	.53	Minus	- 5	3	= ()		X\$ 9=		OR	X\$18=		
	Independent	• 5	Minus	*** <		•		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=					
• 1	" If the entry in column 1 is less than the entry in column 2, write "V" in column 3.									OR	+270=		
	i the Highest Nu If the Highest Na	mber Previously Pa mber Previously Pa iber Previously Pai	id For IN THE	S SPACE I	s loss thau Is less tha	n 20, enter "20." n 3, enter "3."	7.0	TOTAL DIT. FEE In the ap	propriate box		TOTAL ADOIT, FEE Name J.		